

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      ! ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted                      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	4/12/9
2	4/24/20
3	02/02/03
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39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
41	4/12/9
42	4/24/20
43	02/02/03
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51	✓
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53	✓
54	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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